· ·		
Recipient Committee Campaign Statement Cover Page	Type or print in ink.	Date Stamp CALIFORNIA C
	Statement covers period from 10/01/2008	Q iii
SEE INSTRUCTIONS ON REVERSE	through 10/18/2008	11/04/2008BY: OF SANTAMARIA
1. Type of Recipient Committee: All Committees – Complete Parts (2) Officeholder, Candidate Election Committee (2) State Candidate Election Committee (3) Recall (Also Complete Part 5) (Also Complete Part (3) Sponsored (3) Small Contributor Committee (4) Small Contributor Committee (4) Small Contributor Committee (4) Small Contributor Committee (4) Small Contributor Committee	Complete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: X Preelection Statement Semi-annual Statement Semi-annual Statement Semi-annual Statement Supplemental Preelection (Also file a Form 410 Termination) Statement - Attach Form 495
3. Committee Information	1,D. NUMBER 1307852	Treasurer(s)
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends Of Mike Cordero		NAME OF TREASURER Kinde Durkee MAILING ADDRESS
STREET ADDRESS (NO P.O. BOX) 1212 S Victory Blvd		1212 S VICTORY BIND CITY STATE ZIP CODE AREA CODE/PHONE Burbank CA 91502 (818) 260-0669
CITY STATE ZIP CODE Burbank CA 91502	оре AREA CODE/PHONE 2 (818) 260-0669	IT TREASURER, IF ANY
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		NG ADDRESS
STATE ONAL: FAX / E-MAIL ADDRESS	OUE AREA CODE/PHONE	CTLY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS
4. Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best of my k under penalty of perjury under the laws of the State of California that the foregoing is true and correct. 10/21/2008 Executed on	g this statement and to the best of my know ia that the foregoing is true and correct. By Kinde Durkee Mike Cordero	Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under the laws of the State of California that the foregoing is true and correct. 10/21/2008 Executed on Date 10/21/2008 By Milke Cordero Signature of Controlling Officerior Sponsor

4 min	Surer or Assistant Yosasurer	Slats Measure Proponent or Responsible Officer of Sponsor	Iling Officeholder, Candidate, State Measure Proponent	g Officeholder, Candidate, State Measure Proponent
Rinde Durkee	Mike Cordero	Signature of Controlling Officer of dendidate, 8	Signature of Controlling Officehol	Signature of Controllin
10/	10/21/2008	Date	Date	Date
Executed on	Executed on	To behind	To the state of th	

onent
FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California



Recipient Committee Campaign Statement Cover Page — Part 2		Y		CALIFORNIA FORM Page 2 0	460 of 7
5. Officeholder or Candidate Controlled Committee	ttee	6. Ballot Measure Committee	tee		
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF CITY COUNCIL Member. City Of Santa Maria. District:	T NUMBER IF APPLICABLE) District: n/a	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY 1212 S Victory Blvd Burbank	TY STATE ZIP	Identify the controlling officeholder, candidate, or state measure proponent, if any.	ceholder, candi	date, or state measure pr	oponent, if any.
Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.	ement: List any committees rare primarily formed to receive didacy.	NAME OF OFFICEHOLDER, CANDIDALE, OR PROPONENT OFFICE SOUGHT OR HELD	יייייייייייייייייייייייייייייייייייייי	DISTRICT NO. IF ANY	ANY
COMMITTEE NAME	I.D. NUMBER	•	:		
NAME OF TREASURER	CONTROLLED COMMITTEE?	 Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed. 	mittee <i>List na</i> arily formed.	mes of officeholder(s) or can	didate(s) for
COMMITTEE ADDRESS (NO P.O. BOX)	<u> </u>	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
GITY STATE ZIP CODE	ODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	(XC				
CITY STATE ZIP CODE	ODE AREA CODE/PHONE	Atta	ch continuation	Attach continuation sheets if necessary	

Statement	
Disclosure	Page
Campaign	Summary

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARY PAGE	Statement covers period CALIFORNIA 4.60	h 10/18/2008 Page 3 of 7
	Stater from	through_

		from	10/01/2000	I ONIN
SEE INSTRUCTIONS ON REVERSE		through	10/18/2008	Page 3 of 7
NAME OF FILER Friends Of Mike Cordero				I.D. NUMBER 1307852
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAT OBATE	Calendar Year Sum Running in Both the General Flections	Calendar Year Summary for Candidates Running in Both the State Primary and General Flections
1. Monetary Contributions Schedule A, Line 3	100.00	\$ 12860.00	1/1 th	1/1 through 6/30 7/1 to Date
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1		\$ 39060.00	20. Contributions Received	9
4. Nonmonetary Contributions	0.00	\$ 39060.00	21. Expenditures Made	9
Expenditures Made 6. Payments Made		\$ 32229.90	Expenditure Limit Summary for State Candidates	Summary for State
7. Loans Made Schedule H, Line 7 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 5423.69	\$ 32229.90	22. Cumulativ	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)schedule F, Line 3	0.00	0.00	Date of Election (mm/dd/vv)	Total to Date
10. Nonmonetary Adjustment	\$ 5423.69	\$ 32229.90		49
Current Cash Statement	10150 70		1	€9
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 100.00	To calculate Column B, add amounts in Column A to the		\$
	0.00	corresponding amounts from Column B of your last		\$
15. Cash Payments	\$ 6830.10	Column A may be negative figures that should be		\$
If this is a termination statement, Line 16 must be zero.		subtracted from previous period amounts. If this is the first report being filed		\$
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	for this calendar year, only carry over the amounts	*Since January 1, 2001. Amounts in this sec	*Since January 1, 2001. Amounts in this section may be
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	00.00	from Lines 2, 7, and 9 (if any).		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 26200.00		FPPC To	FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Monetary Contributions Received Schedule A

Type or print in ink.
Amounts may be rounded to whole dollars.

P CALIFORNIA Page 4 Statement covers period 10/01/2008 10/18/2008 through. from.

I.D. NUMBER

1307852

SCHEDULE A

SEE INSTRUCTIONS ON REVERSE

Friends Of Mike Cordero

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Sandra Johnson	NOW COM	Retired			\$100.00 G2008
10/01/2008	502 S Marian Dr Santa Maria CA 93454		N/A	100.00	100.00	
		IND COM OTH OTH PLANT				
		MD COM COM OOTH SCC				
		SCC SCC				
		ON CONTRACTOR CONTRACT				

Schedule A Summary

(Include all Schedule A subtotals.)...... 1. Amount received this period - contributions of \$100 or more.

2. Amount received this period – unitemized contributions of less than \$100

- 3. Total monetary contributions received this period.
- (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)TOTAL \$

(other than PTY or SCC) IND – Individual COM – Recipient Committee *Contributor Codes OTH - Other

100.00

100.00

SUBTOTAL \$

PTY – Political Party SCC – Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

100.00

Schedule B - Part 1

Amounts may be rounded to whole dollars. Type or print in ink,

SCHEDULE B - PART 460 5 CALIFORNIA FORM Page 5 Statement covers period 10/01/2008 through 10/18/2008

PER ELECTION*** \$26200.00 G2008 PER ELECTION** \$26200.00 G2008 PER ELECTION *** \$26200.00 G2008 (g) CUMULATIVE CONTRIBUTIONS CALENDAR YEAR CALENDAR YEAR CALENDAR YEAR \$ 26200.00 \$ 26200.00 \$ 26200.00 TO DATE 09/02/2008 DATE INCURRED DATE INCURRED 08/04/2008 08/27/2008 DATE INCURRED (f) ORIGINAL AMOUNT OF LOAN I.D. NUMBER \$ 3128.89 s 3828.82 ,1200.00 307852 (Enter (e) on Schedule E, Line 3) (e)
INTEREST
PAID THIS
PERIOD 0.00 RATE 0.00 RATE RATE 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD \$ 21171.18 \$ 26200.00 DATE DUE DATE DUE DATE DUE \$ 3828.82 \$ 1200.00 AMOUNT PAID OR FORGIVEN THIS PERIOD * ☐ FORGIVEN ☐ FORGIVEN FORGIVEN \$ 0.00 □ PAID DI PAID \$ 0.00 \$ 0.00 □ PAID \$ 0.00 \$ 0.00 \$ 0.00 0.00 RECEIVED THIS PERIOD (b) AMOUNT \$ 0.00 ° 0.00 \$ 0.00 SUBTOTALS \$ 0.00 OUTSTANDING BALANCE BEGINNING THIS PERIOD \$ 21171.18 \$ 1200.00 3828.82 IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) Santa Maria Police Santa Maria Police Santa Maria Police Department Department Department Lieutenant Lieutenant Lieutenant oos □ 200 oos 🗆 FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PIY O OTH PTY YTY | HTO CA 93454 CA 93454 CA 93454 Schodule B.Summarv NAME OF FILER Friends Of Mike Cordero SEE INSTRUCTIONS ON REVERSE HEO [Loans Received 1324 Ruby Court 1324 Ruby Court 1324 Ruby Court COM Woo □ TA IND COM Mike Cordero Mike Cordero Mike Cordero Santa Maria Santa Maria Santa Maria DNI K dai KD

	ć	
1. Loans received this period		
2. Loans paid or forgiven this period\$	0	
(Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)		
3. Net change this period. (Subtract Line 2 from Line 1.)	May be a negative number)	

*Amounts forgiven or paid by another party also must be reported on Schedule A.

** If required.

COM - Recipient Committee (other than PTY or SCC) [†] Contributor Codes IND - Individual

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Type or print in ink. Amounts may be rounded to whole dollars.

ď, CALIFORNIA FORM I.D. NUMBER Page_6 Statement covers period through 10/18/2008 10/01/2008 from

SCHEDULE 433.00 2000.00 2000.00 4433.00 transfer between committees of the same candidate/sponsor AMOUNT PAID information technology costs (internet, e-mail) 1307852 t.v. or cable airlime and production costs SUBTOTAL \$ candidate travel, lodging, and meals staff/spouse travel, lodging, and meals radio airtime and production costs campaign workers' salaries describe the payment returned contributions voter registration DESCRIPTION OF PAYMENT RAD SAL SAL TEC TRS VOT If one of the following codes accurately describes the payment, you may enter the code. Otherwise, postage, delivery and messenger services professional services (legal, accounting) Payments that are contributions or independent expenditures must also be summarized on Schedule D. polling and survey research 8 meetings and appearances member communications 집 CODE POL petition circulating office expenses phone banks print ads A SPECIAL SERVICES AND SERVICE independent expenditure supporting/opposing others (explain)* NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 90501 90501 90501 5 S S contribution (explain nonmonetary)* campaign literature and mailings campaign paraphernalia/misc. 1405 Marcelina Ave #111 1405 Marcelina Ave #111 1405 Marcelina Ave #111 Friends Of Mike Cordero candidate filing/ballot fees fundraising events SEE INSTRUCTIONS ON REVERSE Freeman Public Affairs Freeman Public Affairs Freeman Public Affairs campaign consultants Payments Made civic donations legal defense Schedule E NAME OF FILER Torrance Torrance Torrance CODES: ON P CVC 드문물일 5 880

Schedule E Summary

	יני	5423 69
1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	2	20:03
		C
2. Unitemized payments made this period of under \$100	9	,
		•
2. Tatal interest anid this annied on looms (Enter constant from Cohodule D Dart 4 Column (a))	**	>
3. Total interest paid this period on loans. (Either annount from Schedule B, Fait 1, Coldrill (5).)		
		5423.69
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)		

(Continuation Sheet) Payments Made Schedule E

Amounts may be rounded Type or print in ink. to whole dollars.

of. CALIFORNIA FORM I.D. NUMBER Page __ Statement covers period 10/01/2008 10/18/2008 from

SCHEDULE E (CONT.)

69.066 990.69 transfer between committees of the same candidate/sponsor AMOUNT PAID voter registration information technology costs (internet, e-mail) 1307852 SUBTOTAL \$ campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals radio airtime and production costs describe the payment. returned contributions DESCRIPTION OF PAYMENT through, RAD SAL SAL VOT WEB CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, postage, delivery and messenger services professional services (legal, accounting) 8 polling and survey research meetings and appearances * Payments that are contributions or independent expenditures must also be summarized on Schedule D. member communications CODE 늘 petition circulating office expenses phone banks print ads 등 2 H 등 도 S S F F independent expenditure supporting/opposing others (explain)* NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 90501 S contribution (explain nonmonetary)* campaign literature and mailings CMP campaign paraphernalia/misc. 1405 Marcelina Ave #111 candidate filing/ballot fees SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends Of Mike Cordero Freeman Public Affairs fundraising events civic donations legal defense Torrance C C C **₽**₽ 물일片

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